Fill in this informa	ation to identify your case:	
Debtor 1	Frank C. French, III	
Debtor 2 (Spouse, if filing)		
United States Ba	ankruptcy Court for the: SOUTHERN DISTRICT OF OHIO	
Case number	2:11-bk-57230	Check if this is:
(If known)		An amended filing
00000	D.O.	A supplement showing post-petition chapter 13 income as of the following date:
Official Fo	orm B 61	MM / DD/ YYYY

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

12/13

1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
	If you have more than one job,	Employment status	■ Employed	☐ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	■ Not employed
	employers.	Occupation	Field Engineer	Unemployed
	Include part-time, seasonal, or self-employed work.	Employer's name	Apex Systems	
	Occupation may include student or homemaker, if it applies.	Employer's address	4400 Cox Road Suite 200 Glen Allen, VA 23060	

Part 2: Give Details About Monthly Income

**Schedule I: Your Income** 

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

			_	For Debtor 1		ebtor 2 or iling spouse
2.	<b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2.	\$_	4,333.34	\$	0.00
3.	Estimate and list monthly overtime pay.	3.	+\$_	0.00	+\$ _	0.00
4.	Calculate gross Income. Add line 2 + line 3.	4.	\$_	4,333.34	\$_	0.00

Official Form B 6I Schedule I: Your Income page 1

Debte	Frank C. French, III		Case number (if known)	2:11-bk-57230
	Copy line 4 here	4.	For Debtor 1  \$ 4,333.34	For Debtor 2 or non-filing spouse  \$ 0.00
5.	List all payroll deductions:  5a. Tax, Medicare, and Social Security deductions  5b. Mandatory contributions for retirement plans  5c. Voluntary contributions for retirement plans  5d. Required repayments of retirement fund loans  5e. Insurance  5f. Domestic support obligations  5g. Union dues  5h. Other deductions. Specify: Dental  Spouse Life  Spousal AD&D  UNUM Accident	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.+	\$ 650.01 \$ 0.00 \$ 0.00 \$ 215.85 \$ 0.00 \$ 0.00 \$ 55.51 \$ 0.39 \$ 0.39	\$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00
6.	Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$ 954.09	\$
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ 3,379.25	\$
	List all other income regularly received:  8a. Net income from rental property and from operating a business, profession, or farm	8c. 8d. 8e. ace 8f. 8g. 8h.+		\$ 0.00 \$ 0.00 \$ 1,811.34 \$ 0.00 \$ 0.00 \$ 0.00 + \$ 0.00
	Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	3.379.25 + \$	1,811.34 = \$ 5,190.59
10.	Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. 5	3,379.25 + \$	1,811.34 = \$ 5,190.59
11.	State all other regular contributions to the expenses that you list in Schedu Include contributions from an unmarried partner, members of your household, you other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are no Specify:	ur depend	•	
	Add the amount in the last column of line 10 to the amount in line 11. The rewritten that amount on the Summary of Schedules and Statistical Summary of Certapplies			
13.	Do you expect an increase or decrease within the year after you file this for No.  ■ Yes. Explain: Non-filing spouse is looking for a new job.	m?		
	Took Explain.   Non-thing spouse is looking for a new job.			

Official Form B 6I Schedule I: Your Income page 2

	n this informa	ation to identify yo	our caea:					
Debt						Chr	eck if this is:	
Deni	101 1	Frank C. Fre	ncn, III			CIR	An amended filing	
Debt	tor 2					_	ŭ	ving post-petition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unite	ed States Bank	ruptcy Court for the	: SOUTH	IERN DISTRICT OF OHIC	<u> </u>		MM / DD / YYYY	
Case	e number 2	:11-bk-57230						r Debtor 2 because Debtor
(If kr	nown)						2 maintains a sepa	rate household
Of	ficial Fo	orm B 6J			·			
		J: Your	_ Exper	ises				12/13
info nun	ormation. If nonber (if know	nore space is ne vn). Answer eve	eded, atta ry questio	If two married people and the control of the contro				
Part	Is this a joi	ribe Your House nt case?	hold					
	■ No. Go t							
		es Debtor 2 live	in a separ	ate household?				
		No						
		es. Debtor 2 mus	st file a sep	oarate Schedule J.				
2.	Do you hav	ve dependents?	■ No					
	Do not list Debtor 2.	Debtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relations Debtor 1 or Debtor 2	ship to	Dependent's age	Does dependent live with you?
	Do not state							□ No
	dependents	' names.			-			☐ Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
								□ No
								☐ Yes
3.		penses include of people other t	han	No				00
		d your depende		Yes				
Part		nate Your Ongoi	ng Month	y Expenses				
exp		a date after the		uptcy filing date unless y y is filed. If this is a supp				
				government assistance i				
	icial Form 6		d have inc	cluded it on Schedule I: \	our Income		Your expe	enses
4.		or home owners nd any rent for th		ses for your residence. I	nclude first mortgage	4.	\$	800.00
	If not inclu	ded in line 4:						
	4a. Real	estate taxes				4a.	\$	0.00
	•	erty, homeowner's				4b.	\$	0.00
				ipkeep expenses		4c.		35.00
_		eowner's associa			and a modern to a con-	4d.	\$	0.00
ე.	Additional	mortgage payme	ents for vo	our residence, such as ho	me equity loans	5.	<b>ት</b>	0.00

6a. Electrioty, heat, natural gas 6b. Water, sewer, garbage collection 6b. S. 50,00 6c. Telephone, cell phone, internet, satellite, and cable services 6c. \$	Pentor 1 Frank C. French, III	Case number (if known)	2:11-bk-57230
6a. Electricity, hoat, natural gas 6b. Water, sewer, garbago collection 6b. S. 50.00 6c. Telephone, cell phone, internet, satellite, and cable services 6c. \$ 350.00 6c. Telephone, cell phone, internet, satellite, and cable services 6c. \$ 350.00 6c. Other, Specity. 6d. \$ 0.00 7. Food and housekeeping supplies 7. \$ 550.00 Childcare and children's education costs 8. \$ 0.00 Childcare and children's education costs 8. \$ 0.00 10. Personal care products and services 10. \$ 50.00 10. Personal care products and services 11. \$ 50.00 11. Medical and dental expenses 12. \$ 300.00 12. Transportation. Include gas, maintenance, bus or train faire. 12. Transportation. Include gas, maintenance, bus or train faire. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 15. Insurance. 15. Insurance. 15. Life insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. \$ 0.00 15c. Vehicle insurance 15c. \$ 0.00 15c. Vehicle insurance 15c. \$ 0.00 15d. Other insurance specify: 15d. \$ 0.00 15d. Other insurance specify: 15d. \$ 0.00 15d. Other insurance specify: 15d. \$ 0.00 17d. Cherr. Specify: 17d. Car payments for Vehicle 1 17a. \$ 0.00 17d. Cherr. Specify: 17d. Car payments for Vehicle 2 17b. \$ 0.00 17d. Other. Specify:	6. Utilities:		
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0. Personal care products and services   10. \$   50.00	B. Childcare and children's education costs	8. \$	0.00
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